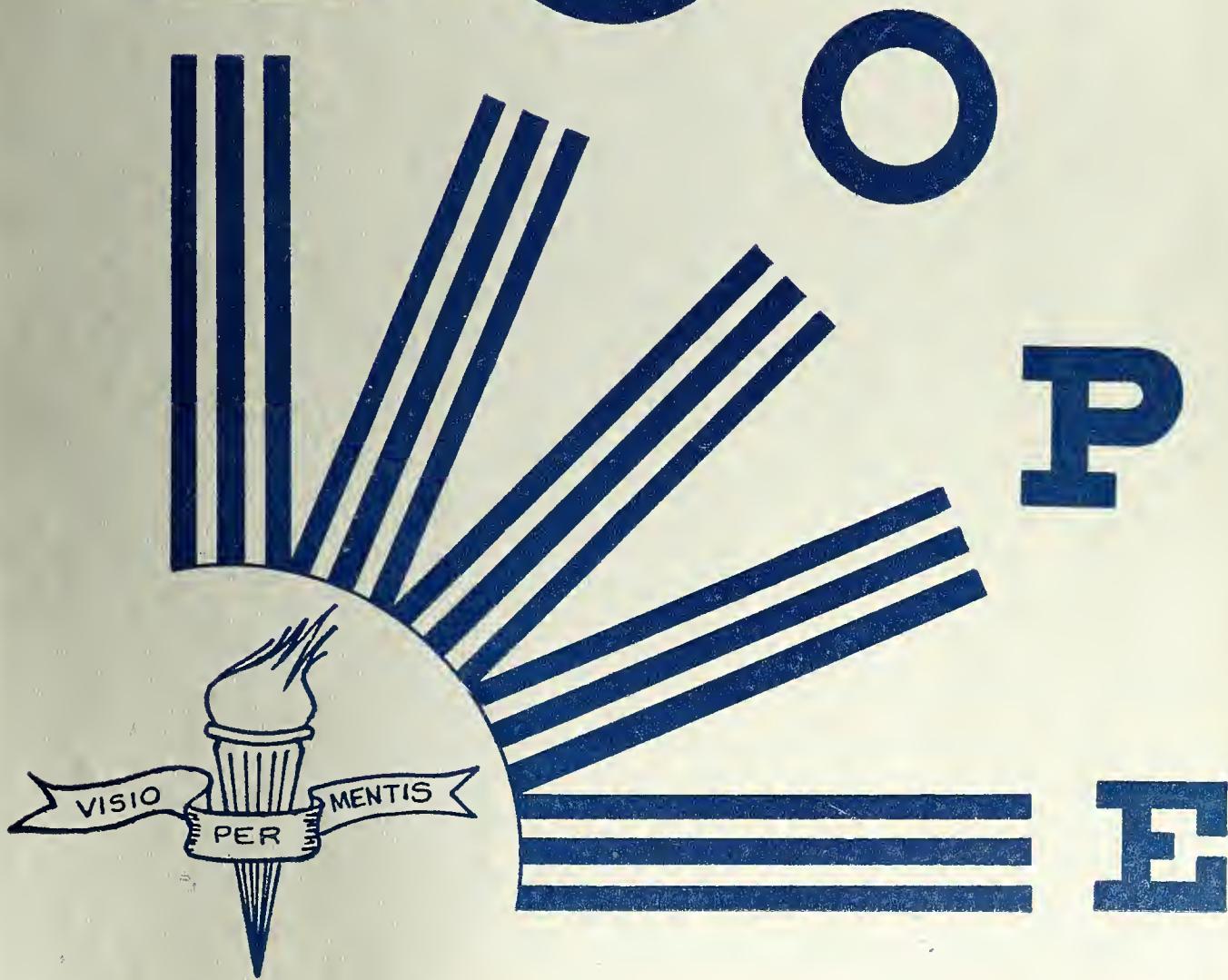


THE

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MARCH 1953



PUBLISHED BY THE STUDENTS OF THE MASSACHUSETTS COLLEGE OF OPTOMETRY

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# THE SCOPE

## Silver Anniversary Issue

MARCH, 1953

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## *Inquiring Reporter*

by Morton Greendorfer

*Question:* — How would you change the optometric curriculum in this college?

**EMANUEL S. GLASSER:** *Senior* — As a student in Optometry, I feel most humble when doubting those men who have proved themselves as authorities in this profession, and who have dedicated themselves to the hard task that involves the teaching and preparing of a new curriculum for his chosen field. Yet it behooves me to question the propriety of a four year curriculum that appears to me to be so lopsided as to allocate the last year of study (and Lo!, the latter semester) as that time to acquire the true fundamentals of the practice of Optometry, itself.

Surely, the time has now come for a careful study of the present program of learning, the time allotted to each category of study, and above all, the planning of a more beneficial freshman year curriculum to allow the student to acquire, at an earlier period in his training, a more complete understanding of the theories and the physiologies involved in visual testing. In this way, the "rat-race" that accompanies the final semester in

a "last-minute" endeavor to learn the "meat" can be alleviated. The senior student can spend his time more profitably concreting these facts, previously learned, and through an increased number of clinical hours, gain more experience in dealing with the variety of problems that he will meet in his practice.

\* \* \*

**WILLIAM TOLFORD:** *Sophomore* — The faculty should do its utmost to consolidate the optics courses so as to allow the senior student to spend a majority of his time in the clinic.

\* \* \*

**PAUL SUSSMAN:** *Junior* — I feel that the freshman year should be eliminated, and the prospective optometry student should take the necessary scientific and liberal arts courses for three years. We should have a four year optometry curriculum with an emphasis on clinical work in the senior year. In this way the student will obtain an adequate background in the sciences and liberal arts, which would help raise our professional standards.

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THE ROLE OF THE OPTOMETRIST IN  
RELATION TO EYE DISEASES

GREETINGS AND BEST WISHES TO THE "SCOPE"  
ON ITS TWENTY-FIFTH ANNIVERSARY  
*Joseph I. Pascal, M.A., O.D., M.D.*  
Formerly lecturer in physiological optics,  
Massachusetts College of Optometry

It is generally agreed that some 75% or more of all examinations for refractive and non-paralytic neuro-muscular anomalies are made by optometrists. Unquestionably a considerable number of those seeking optometric services suffer from some eye disease, in addition to, or quite apart from a refractive or neuro-muscular error. The optometrist is, in duty, bound to recognize the presence of some disease process in the eyes and refer the case to a medical specialist. It is for this reason that all optometry colleges have courses in ocular pathology and the recognition of eye diseases. The following is an attempt to give the student some broad background for his studies.

*Disease and the Reaction to Disease*

All eye diseases, whether confined more or less to the eye, or being a manifestation of some disease process of the body as a whole, can be classified in one of these categories. These are: (1) Inflammatory Diseases. 2) Degenerative Diseases. 3) Destructive Diseases. Inflammatory diseases are those which arouse a reaction on the part of the body, that is, the body mobilizes its defenses to fight the disease. Remember, the inflammation is a reaction similar to fever. Here too the fever is not the disease but the reaction to the disease. This is the modern way of regarding inflammation and fever, but it has not always been thus, and there are still some who to this day see the inflammation and the fever as the essence of the disease process.

Are these archaic viewpoints only of academic interest? They are not; they have a very important bearing on the manner of treatment. There are drugs and physical agents which can subdue the inflammation and allay the fever. The unintelligent doctor looking on the inflammation and the fever as the essence of the disease will try to eliminate them. Not so the well informed doctor who sees in the inflammation and the fever the wholesome manifestation of the body's own defense mechanisms. He may try to control them, keep them within bounds, but he will not try to eliminate them.

*Fever as a Wholesome Reaction*

Many years ago an old physician told me of a very sad experience in his first year of practice. He was called in to treat a child. The child had a high fever the cause of which he could not very well tell. But he realized that there was some deep seated infection somewhere to which the fever was a natural and wholesome reaction. The mother begged him, went down on her knees pleading, "Please stop that fever—my child is burning up." The doctor could not reason with her; he saw at once that to tell her the fever was a good reaction would mean nothing to her, so in desperation he said he could not treat the child, that he would send an older, more experienced doctor. The other doctor stopped the fever—results were fatal. Maybe the child would have died under any form of treatment, but the doctor who told me this felt otherwise and retained this as one of the sad memories of his career.

Such occurrences are probably very rare now. There is a general understanding of the role of fever in disease. In fact, fever is often artificially induced as a means of therapy. I am sure at least some of our readers must have heard of Dr. Wagner-Jauregg who received the Nobel prize in medicine in 1926. I met him in Vienna just before he died and still remember him as a gracious, scholarly gentleman. Dr. Wagner Jauregg was a neuro-psychiatrist in charge of the neuro-psychiatric clinics in Vienna. As you probably know, syphilis in the third stage primarily affects the nervous system, producing tabes dorsalis, paralysis and so on. Unfortunately, the syphilitic toxins do not arouse a reaction on the part of the body and so the patients go from bad to worse. Now Dr. Wagner-Jauregg noticed that those neuro-syphilitics who had contracted malaria, which always arouses a fever reaction, were greatly benefited with regard to their syphilitic lesions. What happened was that the fever aroused to fight the malaria germs fought at the same time all the other noxious elements in the body including the syphilitic toxins. He therefore introduced the malaria treatment for

*(Continued on next page)*

neuro-syphilis with highly gratifying results. For this he was awarded the Nobel prize. Since then fever therapy has been extended to many other domains of medicine. So much for the inflammatory and febrile diseases.

#### *Degenerative and Destructive Diseases*

The second category of disease comprises the degenerative diseases. These do not arouse a fighting reaction on the part of the body and for that reason are even more vicious. Such diseases in the eye include retinitis pigmentosa, familial macular degeneration, senile macular degeneration, toxic amblyopia, in a sense chronic simple glaucoma, and so on. There has been some attempt made to differentiate between the inflammatory and the degenerative diseases by using a different suffix, "itis" to denote an inflammatory reaction such as conjunctivitis, iritis, etc. "Osis" to denote a degenerative process, e.g., "retinosis pigmentosa". Applied to other parts of the body, we have "nephritis" to denote an inflammatory disease of the kidneys and "Nephrosis" to denote a degenerative process in the kidneys. Another suffix, "pathy" such as arterio-sclerotic retinopathy, is coming more and more into use to embrace both types of disease reaction.

The third type of disease entities include the destructive processes of the neoplasms. Here belong the various types of cancerous growths which invade different parts of the body and against which the body offers no effective resistance. In the eye melano-sarcoma and glioma of the retina are illustrative examples.

#### *Recognition vs. Diagnosis of Disease*

Optometrists are required to, and do, study recognition of disease. Now and then some continue their studies for the purpose of acquiring the ability to make a differential diagnosis. However, the former only is to be stressed. Recognition is necessary knowledge, diagnosis a luxury knowledge. If a patient comes to you and you detect early pathology and refer the patient to the physician for diagnosis and treatment you will have rendered a service to your patient and will have earned the respect of the physician. If you miss recognition of early pathology, you fail your patient and you will get little credit from your physician, no matter how well versed you are in differential diagnosis.

Optometrists are in an excellent position to recognize incipient abnormalities because they see so many normal eyes. Only by seeing a great variety of normal conditions can one detect early

an abnormal condition. Just as in order to be able to detect differences in abnormal conditions one must see a number of such abnormal conditions side by side for comparison. For instance, if there are 5 cases of conjunctivitis side by side, one can see the difference between them and learn differential diagnosis.

#### *Critical Observation*

However, in order to detect an early abnormality one must observe intently, critically, not casually. By critical observation I mean looking with the mind intent behind the eye. You can see more of the iris structure for example in one minute of critical observation than in 5 minutes of casual observation. This holds equally true in other observations. You must have noticed this when you ask some one who has just come out from some optical school to neutralize a lens. In many cases he takes the lens and wiggles it before his eye. Whereas you show all he has to do is to make one or two slow movements and watch intently—he can tell the "with" or "against" movement and know if the lens is plus or minus. Similarly, I have had doctors who came to me for some review work in refraction and orthoptics. You watch them use the retinoscope in this way. Well, you show them how much easier it is if they make slowly just one or two movements and watch intently. They can thus tell more easily the nature and movement of the reflex.\*

One can develop habits of critical observation, and such observation is especially important for detecting early pathology. I feel that if a patient comes to you and you do nothing else but detect early pathology and refer the patient for treatment you have given your patient excellent professional services on a par with your regular professional work of correcting visual and neuromuscular anomalies.

\* Pascal, Joseph I. *Studies in Visual Optics*. C. V. Mosby Co., St. Louis, 1952.

**The staff of THE SCOPE takes this opportunity to congratulate the former staffs whose energetic efforts have contributed to the heritage which we deem an honor to uphold.**

**May the next twenty-five years witness an even greater expansion in the content and size of the magazine.**

# *A Message From Dad Jaques*

It gives me great pleasure to greet the student body of your great college. It has been my pleasure during the year to visit Southern College, Pacific University and the Los Angeles College of Optometry and is no exaggeration to say that "you are a wonderful group of men and women who plan to carry the banner of Optometry."

Best of all, you are coming into Optometry at the beginning of a great new era. The old way is about over and the new is just getting to its feet. It is not sufficient simply to correct a manifest error of refraction and let all else go — not in this Atomic-Jet Age of SPEED.

Each of you shall have the opportunity to cut his own shadow — you may go commercial — Semi-commercial — semi-professional or all out for the people. You are now shaping your future, because it is what *you* THINK is so, that IS SO.

If you think Optometry is a racket — so it is to you — poor dumb cluck that you are. If you feel that yours is to fit glasses to broken down functions so as to make them barely last out the life of man — then God help you — that is YOUR LIFE. If you see that the State in which you open your office has conferred upon you the great distinction of TAKING CARE OF THE VISION OF ITS PEOPLE — then you are forever blessed because yours will be a full, wonderful life of SERVICE TO MANKIND.

Think first of the people and the good things you can do — and all else will be added. Prestige — honor — a name in the community — money — travel — and more and more opportunity to serve. There is no greater profession than Optometry, if you but make it so IN YOUR OWN MIND.

Comes a day when you have the choice as to which way you go. Your first patient asks you — as they shall until the end of time — "Doctor — what do you charge for a set of glasses?"

The road down calls for an answer to that question AS A QUESTION. What kind of a frame do you want" — then talk frame — style — polish and end up "selling glasses." If he gets you to dicker — you always lose — because

if you cut your fee, then you look to make money by "buying sharp." A vicious circle is started which will pull you down and down — always.

If you answer that question by asking another question which comes from your heart — deep down inside your being — "Why do you ask — do you have visual trouble — what seems to be wrong?" As he answers your question and you put him at ease by BEING READY TO LISTEN, he will pour out troubles to you and if — IN THOSE TROUBLES YOU SEE A WAY OF MAKING MONEY THEN YOU ARE AN UNWORTHY PROFESSIONAL PERSON. If you see in those troubles A GREAT OPPORTUNITY TO SERVE FELLOW MAN — then — my Son — you are IN.

It is as simple as that — for — "AS A MAN THINKETH IN HIS HEART SO IS HE."

LOUIS JAQUES

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Editor-in-Chief

The Scope

Mass. College of Optometry

178 Newbury St.

Boston, Mass.

Dear Sir:

As president of the Mass. College of Optometry Alumni Association I wish to extend the association's heartiest congratulations to "The Scope" on its twenty-fifth anniversary.

I know that every member of the association, having been a recipient of "The Scope" during college days, can recollect the excellent material which was made available through this organ.

Also, please convey the gratitude of the association to the staff members of "The Scope" for their compilation and toils in the presentation of this professional optometric publication for the student body.

Very truly yours,  
HAROLD GOREN, O.D.  
President, Alumni Association  
of Massachusetts College of  
Optometry.

## *Optometrists and Conventions*

*Secretary, New York State Optometric Association*

*Vice-Chairman, American Optometric Association*

*Congress Committee*

It is indeed a pleasure to contribute to the Twenty-Fifth Anniversary issue of THE SCOPE. A quarter of a century is quite a span of time and especially so in Optometric practice. As a graduate of the 1914 class of the Massachusetts College of Optometry, (although it was not called that in those days) when we look back and see how Optometry was practiced then, and compare it with the Optometry of today, we can truly say that our profession has made terrific strides, and there is indeed hope for the future of Optometry.

The days of commercialism in Optometry must cease if it is to survive as a profession, and Optometry's chance to survive must depend solely on its practitioners' professional skill. It is no longer sufficient to be able to 'fit a pair of glasses.' So much beckons the truly professional Optometrist, orthoptics, visual training, contact lenses, illumination, oh, so much more.

It is only by constant interchange of ideas, by

association with our fellow-colleagues, by helping each other, that we can go forward. Cooperation and not competition will prove to everyone's advantage. I am reminded of an article I recently read on Convention's, which stated . . .

The true purpose of a Convention is to provide a place where mind can enrich mind, where personality can contribute to personality, where enthusiasms can pool to build larger common enthusiasms, where friendship can blossom into finer friendship, where character can add to character.

In a limited sense it may be true that the individual is always on his own and is single and alone in his ultimate decisions. It is not true, however, that he can by himself be a complete entity. Heredity gives him his foundations, but only contacts can provide the materials for his superstructure.

In line with these sentiments, I wish to extend a cordial invitation to all Massachusetts optome-

*(Please turn to page sixteen)*



**Take nothing less  
than the best**

**Insist on *Orthogen* Bifocals**

No matter what bifocal style or segment shape you decide upon—you'll find it in the one lens system specifically designed to correct for marginal astigmatism. Patients get true edge-to-edge clarity of vision in lenses built on Orthogen curves. Orthogen is the *complete* series in bifocal types.



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**NORTHEASTERN DIVISION**

## *Back Through The Years*

by Harry S. Marcus

The wonder of Optometry lies in its newness. 1924, a short 29 years ago, saw the final passage of a professional optometry law in the United States. Yes, the years 1901-1924 saw the entire country hail the emergence of a new profession. Since those eventful years, our profession has advanced from the "swaddling clothes" of jewelry stores and neon signs to a young manhood of promise and reassurance. It would be folly, however, to conclude that optometry has yet reached maturity, but likewise, it would be folly to believe that such rapid growth could suddenly stagnate and regress. The events of the future are beyond our limited powers but they are certainly within our intellectual analysis. We need only examine the old issues of our optometric publications for a very vivid experience. Can we learn what the future holds by seeing and judging what advances have been made in these passing years?

Back 25 years — back in ideas — back to the childhood of optometry. What do we see? What do we, now in the young manhood of optometry, see? Would it encourage us as students who in only a few years will be assuming the responsibilities of Optometrists? Are we still struggling against inexorable forces? Must we resolve ourselves to an existence as a second class profession, doomed to mediocre incomes and reduced prestige, or does the passage of these 25 years presage a new era for Optometry — an era of continued successes, of greater prestige and of fuller recognition for our invaluable and essential services? Let's move back!

1932

"EFFECTIVE WINDOW DISPLAYS — One of the latest ideas in optical window displays has been recently made a part of the . . . . . advertising program. This display has been pronounced to be just the kind of ethical, refined, and educational window publicity that gives dignity to the optometrist's front."

1931

"THE SUN-DODGER SEASON IS HERE— This colorful display will sell many sun-dodgers, ("sun glasses") for you this summer. Always keep the display filled with an assortment of Sun-Dodgers and they will sell themselves. There is a nice profit waiting for you . . . ."

This advertisement along with a list of "Sales

Slants" and a picture of the "lovely" colorful counter display appears in a 22 year old copy of an optometric publication. Notice those words "colorful display," "sell," and "nice profit is waiting for you." Optometry was the business of selling glasses and making a substantial profit from it. No mention was ever made of patient comfort, or of service. Contrast that with this recent advertisement.

"When your patient has left your office, the only measure of the value of your professional service he has is the efficiency of his vision. The lenses you have prescribed carry full responsibility . . . ."

No mention is made of profits, sales, or displays. The sign of a true profession is its stress upon comfort, service and satisfaction. No one can deny that our income is important — that we must make a comfortable living in order to exist and function adequately, but income will be sure to follow the satisfied, confident, and comfortable patient. The optical companies have come to recognize Optometry as a Profession. They are aware of our growth and of our valuable services. Certainly, the past quarter of a century has seen great changes in their advertising and attitudes towards us.

The years have brought many other advancements and changes to Optometry — the development of the Optometric Extension Program led by Skeffington and Barstow with their attempts to standardize Optometric Procedure and Analysis — the Better Vision Institute — Industrial and Occupational Vision Programs — School Surveys — the many developments of new techniques such as the visual recognition chart, and visual training — the great strides in visual psychology — Think of what 25 years have meant to the educational standards in Optometry.

We quote from an advertisement.

"OPTOMETRY  
18 Months in Day Classes  
24 Months in Evening Classes  
STARTS JUNE 26

Shortest route in bright professional career for young men and young women. solution of economic problem of men and women of mature years. Exceptional opportunity . . . . to attain professional status — work part time while studying . . .

*(Please turn to page twenty)*

## *Visual Progress*

by Ira Schwartz

Time is rapidly pushing this reporter to the point where he will soon be engaged in his own research and his own practice. While personal experience in examination and refraction has been limited, there seems to be two striking items that bear watching.

The ideal circumstances for examination of the eyes appears to be monocular examination while the eyes are being used binocularly. This is not easily done but we have indications it may be quite common in the future. Dr. S. L. Norman of Florida, has published his preliminary work in this field in a few articles in the Optometric Weekly. By polarizing his phoropter cells in different directions and polarizing his projection chart to insure that his monocular examination is done under binocular conditions, Dr. Norman is devising an examination technique that appears to fulfill the desired conditions. While this work is in the preliminary stages, enough has been done to indicate its importance and merits the serious consideration of the profession.

The other item, is the necessity of having better targets or better arrangements made of the test targets available. Targets should be of a nature that the patient is confronted with a situation he does not encounter in every day life. We are appalled by the low reliability coefficients of our tests and by the low correlations between tests as reported by Morgan. This indicates that the tests have poor validity and we are not testing what we say we are testing, or what's more important, what we would like to test. Let us cite two examples:

(1) In determining the presbyopic add by cross-cyl and grid chart, we seem to have a pretty good test. There is very little confusion on the part of the patient with his judgment being almost an on-off type of judgment. All but a very few "illiterates" can be tested by this method. The results appear to have a high repeatability. There is room for improvement, yes—but not much.

(2) Next, let us consider the Snellen Letters. With a reliability coefficient of .64 and a validity coefficient not much higher, it is no wonder that

a patient's score can vary quite a bit from examination to examination and even during the same examination. It is further undesirable in its non usage for illiterates, small children and patients of foreign extraction who do not speak English. It is also every refractionists experience to have the feeling some patients see better than their Snellen score indicates and sometimes poorer than their Snellen score indicates. All things considered, the Snellen Letters is a poor test. For a better one we don't have to look very far. The B&L chequerboard target is the finest test, devised to date, for testing visual acuity. It has a high coefficient for both reliability and validity and is easily administered to the "problem" cases cited above. We are not losing sight of the fact that the patient must be made aware of the vision he is capable of attaining and since he is most familiar with letters, the letter chart must be demonstrated to him as a final step. However, acceptance of a good letter chart is long overdue.

## *For Style in Glasses*

use

**Lady Fairfield**

**Lord Fairfield**

**Princess Fairfield**

**Prince Fairfield**

The finest plastic frames made

**WILSON & HALFORD  
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**387 Washington Street**

**Boston 8, Mass.**

## *Optometric Events* by Thomas A. Couch

### MISSISSIPPI LAW TESTED

The Mississippi Supreme Court held that the State Board of Optometry is authorized to enjoin a physician from acting as a "front" for a company unlawfully engaged in the practice of optometry. The M.D. was employed by a Jewelry company and devoted his full time to the firm in examining and prescribing.

\* \* \* \* \*

### TAXING OF PROFESSIONS

In the Georgia Legislature, bill H. 59 has been introduced which proposes that no municipal corporation or county authority in the State shall levy or collect any license, occupation, or professional tax upon practitioners of optometry and other specified professions.

\* \* \* \* \*

### WASHINGTON AND OPTOMETRY

At this writing hearings are being held on bills some of which concern optometry by the House of Representatives.

H.R. 116—Restrict the interstate shipment of fireworks.

H.R. 632—Amend the optometry law in the District of Columbia.

H.R. 257—Establish a National Advisory Committee for the Blind.

H.R. 338—Broaden the scope of out-patient treatment for non-services connected disabilities for certain veterans.

H.R. 402—To assure the provision of all necessary service to prepare disabled persons for and establish them in remunerative employment, to make special provision for the blind and other severely disabled persons, and for other purposes.

H.R. 1817—To provide a program of national health insurance and to assist in increasing the number of adequately trained professional and other health personnel.

H.R. 1862—To amend the Social Security Act to increase the Federal payment aid to the blind. This bill has no direct

bearing upon the certification of blindness, but there might be an amendment so as to deal with this subject.

\* \* \* \* \*

### KANSAS LAW TESTED

In Kansas an optometrist had his license revoked on the ground that he rented space in a jewelry store in violation of the regulations. He is now testing the constitutionality of the Kansas optometry law in a suit against the Kansas State Board of Examiners, as he claims these regulations are unconstitutional and illegal.

\* \* \* \* \*

### H. R. 632

A new bill similar in structure to a bill passed by the Senate last year but failed in the House of Representatives was introduced in the House again this year.

This bill (H.R. 632) states a requirement of "not less than five years" in an accredited optometry college before an applicant would be eligible to take the standard examination.

The measure would ban advertising of fees for professional services and prices of ophthalmic materials.

It would not prevent advertising of prices of eyeglasses not prepared, manufacturer, or sold on the prescription of a physician or an optometrist.

### JOBE SPEAKS

February 17, the Mass. College of Optometry Undergraduate Research Laboratory sponsored a lecture by Fred W. Jobe the Director of the Department of Ophthalmic Research and Development, Rochester, N. Y. He spoke on the capacity he has supervised—the development and research of the many new ophthalmic instruments and devices. Included on the roster of his achievements is the new B & L Retinal Camera, the only instrument of its kind now in production in the United States, and the Ortho-Rater.

\* \* \* \* \*

### V. A. OUT-PATIENT CARE

Bill H.R. 2980 authorizing qualified optometrists  
(Please turn to page ten)

## DEFENDS OPTOMETRY BILL

*The following is a reprint of an article written by Bernard Bernstein, a member of the junior class, in support of organized optometry's stand on professionalism and the recognition of optometry as a distinct science and profession.*

Your editorial appearing in the Feb. 9 editions, entitled "Optometrists Again," is a gross distortion of the facts and issues at hand. Once again your paper is guilty of taking statements out of context and exploiting them to your own selfish advantage. This kind of journalistic chicanery and duplicity which you have so cunningly employed makes it imperative that your editorial be challenged and the public be given the facts in crystal clear fashion.

To begin with, optometry is not a business but is in fact a profession and recognized as such. It is interesting to note that optometry is one of the three professions in the medical field that is recognized in the 48 states. Furthermore, in 40 of the 48 states there is a Supreme Court decision naming optometry as a distinct profession and science.

Your editorial questions the establishment and the propriety of the State Board of Optometry to regulate the practice of optometry. The fact is that the state board originally was designed with specific duties to insure and protect the public in seeing that they receive the best type of visual health care from duly qualified and licensed practitioners. It seems more logical than academic to ask who is best qualified to comprise the State Board of Optometry and regulate its practice than professionally trained, licensed optometrists.

Moreover, you neglect to mention a very important phase of this pending optometry bill: that is, the driving out of optometrists from department and jewelry stores. It seems very inconsistent that in a previous issue of your paper you were quick to report that this phase of the bill constituted a major portion of the public hearing proceedings. Surely the most uninformed would be first to agree that when one is in need of medical or dental attention, he seeks out a professional clinician who is not located in a chain, department or jewelry store.

By providing a strong, wholesome, ethical and professional bill which would have legal status as defined by the State Board of Optometry, there can never be any question or danger of abuse or mal-practice within the field of optometry.

Since we are unfortunate enough in this community to have a one-newspaper system, it seems to

me that you would do best by giving the lay people facts and not misrepresentations; objective and clear-cut analyses rather than biased and strongly opinionated statements; and finally, the whole story in complete form rather than half-truths and begging questions. In the last analysis, your editorial has rendered a great disservice to the public and to the professional community.

BERNARD BERSTEIN.

Providence Journal

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## EVENTS—continued

to administer Veterans Administration out-patient treatment was introduced in the U. S. House of Representatives on Feb. 12 at the request of the A.O.A.

The rule now followed by the V.A. is that an Ophthalmologist perform the out-patient visual examination.

## OPTOMETRY COLLEGE DAY

The University of Houston College of Optometry designated a day as Optometry College Day. On that day each Texas optometrist was requested to contribute his day's office income minus laboratory costs for that day. The funds collected will represent the principal source of the college's funds for the year.

## GLAZED GOODS BILL

The Brady glazed goods bill in the New York State Assembly is strongly being opposed by Representatives of the medical profession, optometry, and ophthalmic dispensing. This bill would permit the sale of magnifying spectacles in any store without requiring the attendance of a physician or optometrist.

## FROM EAST TO WEST

California—S.140, to amend the Business and Professions Code relating to optometry, proposes that after Jan. 1, 1954 no person shall practice optometry in or on any premises where any commodities other than those necessary to render his professional services are sold or offered for sale.

Massachusetts—H.456 proposes the creation of a board of registration of dispensing opticians. H. 1180 proposes that no person shall use the term "doctor" for any purpose unless he has received the degree of doctor from a college, university or school authorized to grant such degrees.

S. 190 proposes to require every child in the public schools to be separately and carefully tested and examined at least once in every school year to ascertain defects in sight or hearing.

## THE SCOPE

Official undergraduate publication of the

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HAROLD CLINE, O.D.

*Faculty Advisor*

DEAN RALPH H. GREEN

## MASSACHUSETTS COLLEGE OF OPTOMETRY LAUNCHES BUILDING FUND CAMPAIGN

The Trustees of the College, together with a large gathering of Alumni, officially launched a campaign to raise a building fund of \$100,000 at the Annual Luncheon of the Alumni Association held March 15 in the Hotel Statler.

Those present were addressed by Dr. Joseph Montminy, President of the College; Dean Ralph H. Green; and Dr. Otto Hochstadt, Treasurer. The theme of the remarks made expressed the need for funds to make secure the position of the College and provide funds for expansion and improvement of the facilities.

Dr. Montminy installed the new officers of the Alumni Association and offered his best wishes for the continued success of the Association.

Dean Green gave a brief summary of the many advances made by the College in the past seven years. He pointed out that only by careful plan-

ning by the Board of Trustees were these advances made possible. He especially called attention to the fact that while the College seeks the financial assistance of its Alumni at this time, there were times during the reorganizational period when the College experienced considerable financial difficulties which were met by individual members of the Board of Trustees.

He emphasized that optometry generally is not supporting its educational institutions, thus placing optometric education in a position of weakness and jeopardy. He indicated that the profession can advance only as far as its educational institutions allow, and without financial assistance the schools will be forced to seek financial aid from other sources.

He urged those present to respond to the appeal for financial assistance and to lend their support by personally contacting other alumni to bring to their attention the needs of the College.

Dr. Hochstadt gave a summary of the many financial problems with which the College was faced during the years of reorganization and explained the need for the present campaign to raise funds to pay off the mortgage now existing on the Horace Mann Building. He announced that the response to the appeal is heartening, having received pledges in the amount of \$4,000 of which \$2800 had already been received and deposited in the account of the Massachusetts College of Optometry Building Fund.

*Initial contributors to the Massachusetts College  
of Optometry Building Fund*

Dominic Capone, O.D., Bristol, R. I.	\$1,000.00
Joseph F. Montmony, O.D., Lowell, Mass.	1,000.00
Joseph Miller, O.D., E. Greenwich, R. I.	1,000.00
Frederick E. Farnum, O.D., Boston, Mass.	300.00
Harold Cline, O.D., Mattapan, Mass.	50.00
Malcolm D. Harris, O.D., Presque Isle, Me.	300.00
Ralph H. Green, O.D., Medway, Mass.	100.00
Otto Hochstadt, M.D., Boston, Mass.	100.00
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Samuel Wasserman, O.D., Randolph, Mass.	50.00
Sidney Taylor, O.D., Lynn, Mass.	30.00
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Eugene J. Bogage, O.D., Flushing, N. Y.	75.00
Donald W. Horley, O.D., Arlington, Mass.	50.00
Arthur March, O.D., Concord, Mass.	100.00

# On Our Silver Anniversary

Abraham Shapiro, Editor-in-Chief  
"The Scope"  
178 Newbury Street  
Boston, Mass.

Little did we dream 'way back' in our student days, when we started a little school publication, that we would be extending a congratulatory message to its editors a quarter of a century later.

Just about twenty-five years ago, Ralph Green and I thought it would be nice to have a school paper. Together with Charlie Hall, Shirley Jones and Siegfried Pels, as well as a representative group of Juniors, we formed an editorial staff.

Our first assignment was the choice of an appropriate name for the publication. After due deliberation, the final choice was "The Scope," for several reasons. First, it was the derivative of the Greek word 'Scopein,' meaning—To See. Second, was the number of instruments used in our studies and practice, having the word ending 'scope.'

It is gratifying to watch your child grow through the years. Therefore, it is with extreme pleasure that I extend my heartiest congratulations to Dean Ralph Green and the Editors and Staff on the twenty-fifth birthday of "The Scope." May the College Administrative Officers, the Faculty and "The Scope" continue to enjoy for many years to come, the prestige established by their high aims and ideals.

BERNARD G. FRITZ, O.D.  
First—Editor-in-Chief

\* \* \* \* \*

Abraham Shapiro  
Editor-in-Chief of the Scope  
Massachusetts College of Optometry  
Boston, Massachusetts.

Dear Mr. Shapiro:

This year marks the silver anniversary of the publication of The Scope. I can well remember twenty-five years ago when, as a student of the then Massachusetts School of Optometry, together with Dr. Bernard Fritz, a fellow student, the idea of publishing a student paper was conceived. With a student body of thirty-six the cost of publishing such a paper was prohibitive. It was necessary, therefore, to canvas the ophthalmic manufacturers and optical laboratories as well as business establishments in the immediate vicinity of the school to sell advertising space. Sufficient revenue

was thereby received to allow the publication of the first *SCOPE*. This very briefly is the background of the *Scope*.

Having been associated with the school since 1930, I have had the opportunity to work closely with those who, through the years, have accepted the responsibility of publishing the school organ and to know the many problems with which they have been faced. To say that The Scope is a credit to this institution is a gross understatement. Reference has been frequently made by directors of other schools of optometry to the *Scope* and the dignified and forthright manner in which it presents student news as well as news of optometry at the state and national levels.

To you and your staff I offer my most sincere congratulations in keeping alive the spirit of the *Scope*. To those who were responsible for publishing The *Scope* through the years I offer my thanks and best wishes. May The *Scope* continue to represent the College in the same dignified manner it has for the past twenty-five years.

Sincerely,

Ralph H. Green,  
Dean

\* \* \* \* \*

Mr. Abraham Shapiro  
Scope Editor  
Massachusetts College of Optometry  
Boston, Mass.  
Dear Mr. Shapiro:

It has come to my attention that the *Scope* is this year celebrating its silver anniversary. This marks 25 years of continuous publication of student and College news as well as news of technical to the profession of optometry.

Those who have been responsible for publishing such a fine student publication deserve a great deal of credit for giving the College a news outlet that is regarded an asset to the College as well as to the profession of optometry.

Please accept my congratulations and very best wishes for many years of successful publication of the *Scope*.

Sincerely yours,

Joseph F. Montminy, O.D.  
Pres. of the Board of Trustees  
Massachusetts College of  
Optometry

# Camera Club News

by G. Nissensohn

In this article I am going to discuss the type of lighting that a camera fan will encounter when taking a picture. Since most pictures are taken outdoors I will try to give as much information as possible on outdoor lighting and exposures used for these conditions.

For outdoor photography in daylight, there are basically four types of lighting.

- a. *Bright*—When the sun is shining unobscured.
- b. *Cloudy-Bright*—When there are light clouds.
- c. *Hazy*—When soft shadows are cast.
- d. *Dull*—When the sky is overcast and no shadows are visible.

In order to give exposures for the above types of lighting I must first discuss types of subjects, as the exposure will also vary with the type of subject being photographed. We have to establish a standard subject to base our exposure time on, therefore we will use a summer landscape with the foreground and little sky as the average subject. For following stop openings the exposure for a medium speed film would be: F:4.5, 1/200; F:5.6 & 6.3, 1/100; F:8 & 9, 1/50; F:11 & 16, 1/25. These exposures are nearest to the theoretical exposures. For other subjects the time is changed as follows:

Open sea or clouds —  $\frac{1}{4}$  to  $\frac{1}{2}$  indicated time.

Beach scenes and distant landscapes —  $\frac{1}{2}$  indicated time.

Landscapes, groups and street scenes — indicated time.

Dark street scenes, buildings, portraits, etc. — Twice indicated time.

Heavy shade or woods — Four to eight times indicated time.

Now we will take that average subject and consider the light conditions.

For the following light conditions we change the exposure as follows:

*Bright* — Indicated time.

*Cloudy-Bright* — Twice indicated time.

*Hazy* — Four times indicated time.

*Dull* — Eight times indicated time.

When pictures are taken between 4:00 P.M. and sunset, or between sunrise and 9:00 A.M., the exposure should be doubled. During winter months the exposure should be doubled.

Now let us correlate the above information and form an exposure guide to be used. We will assume the time to be 10 A.M. to 2 P.M.

Subject	Lighting	Speed	Stop
Open Shade	Bright	1/30	F:11
	Cloudy-Bright	1/50	F:6.3
	Hazy	1/30	F:6.3
Groups in Open	Bright	1/50	F:11
	Cloudy-Bright	1/100	F:6.3
Sport Shots in Open	Hazy	1/50	F:6.3
	Bright	1/300	F:4.5
	Cloudy-Bright	1/300	F:3.5
	Hazy	1/200	F:3.5

There are many more exposures for other types of subjects and lighting, but it will take up too much space. They can be determined by the information given in the previous paragraphs.

In the next article I will attempt to give an exposure guide for indoor exposures and flash exposures.

\* \* \* \*

## SHUTTERBUG NEWS

We the members of the camera club wish to extend to the editors of the "Scope" congratulations on their silver anniversary. Here's to greater future success.

I would like to announce the election of Frank De Caesare as chairman of the camera club. Congrats, Frank.

I hope the students liked the showing of photographs in the main hall of the school. I can promise that the future showings will be larger and even more interesting.

See you next month.

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A lion got loose at the circus and ran toward a man in the audience. The man broke and ran. "Don't be afraid," said the trainer, "that lion hasn't got any teeth."

"Maybe not," the fellow shouted back over his shoulder, "but I'm not going to stand here and be gummied to death!"

---

1st Sea Gull: "Who won the race between Yale and Harvard?"

2nd Sea Gull: "Yale, of course."

1st Sea Gull: "That's too bad, and I put all I had on Harvard."

# SENIOR COLUMN

## SENIOR SENTIMENT — — — A STUDY IN VALUES

The swirling vapor poured a sombre cloak about the phantom throng. It did not seem possible that any sanctuary could contain such tension—even this nebulous hall of fantasy. Its size was tremendous, and yet an ethereal haze gave one the feeling of unnatural confinement.

Pleading glances were vainly exchanged with equally discordant strangers. Shifting knolls of pseudo-humanity sought a common solution, and all the while the iridescent haze played its restless theme. The cloudy walls further belied anything mundane, only to be contradicted by a large black door at one end of the room. It was to this door that all eyes returned, after cursory examinations of other areas.

One old man in particular, stared thoughtfully at the door, his body dissolving into the mist, like the others. Every now and then a nervous smile crept over his features, and his tongue slowly, deliberately caressed his parted lips. Even the undulating atmosphere could not dim the sparkle in his eyes.

While he watched, the door floated open, and a grandiose figure emerged, robed in the purest of white. In his hand was an engraved scroll, from which he called out in a clear, magic tone, Antoine Francis Medician.

A tall stranger advanced toward the door, from a corner of the kaleidoscope hall. He passed through with noticeable confidence, and stopped in front of a brilliantly glowing desk, behind which calmly sat another white-clad figure. The tall stranger's pose was obviously undermined by this fantastic tableau, and yet his speedy recovery spoke well for him. He swallowed hard a few times, blinked quickly, and spoke with a firm voice, which nonetheless betrayed some troubled emotion.

"You sent for me, Sir?" he asked.

"Yes. As you know this is the time for investigation of past performance. We shall need some preliminary information.

"Your occupation?"

The tall stranger stared incredulously into the unyielding eyes of his examiner.

"Sovereign ruler of all the empires of Curistan," he replied.

"You helped the weak; you aided the oppressed?"

"I did my best. If you permit me, Sir, they are still mourning me."

"You furthered progress; you contributed to happiness?"

"Those were my chief aims."

"You were given many opportunities to alleviate suffering. Did you inconvenience yourself to do so?"

"The welfare of my people was always my primary concern."

"In the final analysis, did you do all in your power to make the world a better place in which to live?"

"My record is good. I wish to stand on its merits."

"And so you shall, Sir. If you will wait in the next room, a decision will be forthcoming."

As the king retired, the Scribe turned to an assistant. "You will conduct the routine investigation on Antoine Francis Medician, and bring the results as soon as you can." In a hushed tone he added, "He was a good man."

The next voice echoed through the outer hall. "Jeffrey Sharpe!"

The old man, who had nervously been waiting, approached the desk, and spoke softly.

"Yes, Sir," he said.

"Jeffrey Sharpe, this is a preliminary investigation of past performance. What was your occupation on Earth?"

"I am an Optometrist, Sir!"

The examiner smiled, and said to an assistant, "Show Dr. Sharpe to the stairway going up."

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Intuition is something that tells a woman she's right when she isn't.

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Most folks make more enemies by what they say than friends by what they do.

# JUNIOR JABS

by Paul Sussman

It was a cold, rainy evening. We were working the scope watch out of Histology. Bum to dum bum. Oh, wait a minute, wait a minute, that was last month. Yes, it all comes back to me now, as I sit here in my lonely garret, staring up at the Hancock Building tower, watching the minute, insignificant figures plunge one by one off the parapit into the murky blackness of the night. Yes, there's Bolvin, Bernstein, all following the doctor's orders.

Hey, what's that up there? It's a bird, it's a plane, no, it's a stork. Wait, there's something familiar about those dark eyes and big eye lashes. Why it's Bob George. Congratulations dad.

As I was saying, it's all coming back to me now. My head feels as though there's an axe in it. Oh, that awful cloomping.

By the way, in case this article seems different this month, it is different. This is me, you know, Sussman, yes, the assistant cataract surgeon. Where's Shannon? Oh, he just kissed the blarney on the thirty-ninth story of the Hancock Building. He left his parachute home.

The latest news is that Ray La Plante is selling windshield wipers. How are you fixed for blades men?

I would like to extend the thanks of some juniors to Norm Maxwell. His onions sure did the trick.

In order to get some variety into these pages of boredom, I turned into an inquiring reporter. After all, what has Greendorfer got that I haven't? Don't answer that.

The question was, "What is an Accommodative Rock?" I received a variety of answers from fellows such as:

Shannon—who states, "An Accommodative Rock is a shamrock with a blarney."

Carambia—"That's what I hit Maxwell with."

Levine—"Why he teaches histology."

La Plante—"Does it have a windshield wiper?"

Green—"I know, that's a hyperope with stones in his head."

Now that Markowitz has been informed he is an incurable Deutanope, it explains why he once waited three weeks for a red light to turn green.

And now gentleman, station W.M.C.O. presents

its latest quiz show "Pick A Boner." Your quizmaster is Dr. T. Lens Epithelium, universally known histologist, and expert on the bones of the eye.

Our panel is made up of the "Who's He's" of the junior class. From left to right we have: Dr. Lushwell Loxpicker Levine, inventor of the cattle needle inoculation of cross-eyed cattle against Bolvin T.B.

Dr. Backstage Nobel—president of the Providence Society of Misplaced Bacteriologists, and founder of the American Association for the Prevention of Viennesse Physicians.

Canvas Back Bolvin—noted figure in the field of pugilistic endeavors, and the only man in the world who can outrun the Boston-Providence Express by nine percent.

Dr. George Kedyd Scribble, famous translator of hieroglyphics, and the only living person who can write neater with his feet than he can with his hands.

Our program begins.

Dr. T.L.—Hey-y ! ! I got a "honey" for you guys. Hey-y, there's my friend Lushwell.

Hi ya Lush! Can you tell me something about the tarsus for five chartreuse chips?

Lushwell—Yais, hmm-mm, sputter, sput, yais, it's at the foot—

Dr. T.L.—Oh Lush. Ya let me down!

Lushwell—at the foot of the eyelid.

Dr. T.L.—Hey, ya good Lush! Now here's one that will getcha.

Hey ya genius! Georgie-e-e! What do you know about the optic cup?

Dr. Scribble—It's no good unless it's filled with coffee.

Dr. T.L.—Hey, my old pal Mike! Hey Mikey boy, what can ya tell me about Conklin's stain?

Bolvin—(trying to bluff his way off the subject) I read about that —

Dr. T.L.—RED! Yeah, the guy's go-o-o-o-od! !

Dr. T.L.—(eyeing his watch) Hey, now let's see, ah yes, Bernie Nobel! What about the lamina fusca?

Backstage—The lamina fusca is the same as the lamina fusca of the same name, that is lamina fusca, of the Choroid, which is composed of—

*(Please turn to page twenty-one)*

# SOPHOMORE SCOOPS

by Lee Gellerman

March 21st ushered in Spring, 1953, and the beginning of intramural baseball at M. C. O. Last year when we were "budding" freshmen (memories, memories . . . ho, hum), the softball team had an impressive record against many of the small colleges around Boston and vicinity. The soph class sports classic power among their 16-man roster, and are ready to take on all comers for the prize "loving cup" at the close of the semester.

During the latter part of April, a dinner is being planned for the sophomore class as a popular Boston night club. Part of the expenses for the dinner will be covered by our class treasury funds, which delights the guardian of the exchequer, Art Giroux, no end. In conjunction with the dinner, president of the class, Lee Eastman, will officiate at a meeting to adopt the newly proposed by-laws and constitution of the soph. class. The reunion committee will disclose plans for future years.

Congratulations go to the M. C. O. basketball team for walking off with top honors in the "Greater Boston Small College Conference" . . . your skillful coaching has finally paid off, Dr. Kuhn, and we hope for a repeat performance next year, when your seasoned veterans take to denting the nets for counters galore.

March 28th, the members of the P. O. S. Fraternity challenged the alumni teachers and clinic instructors of M. C. O., in the traditional basketball game at the Hecht House Gym, in Dorchester. Dr. Kuhn coached the alumni team and Bill Ryan of the soph. class captained the Fraternity team. Following the game, dancing was held in the recreation room, with the awarding of a "trophy" to the winning team.

## SOPHOMORE BRIEFS:

The Student Council has come up with a proposal for our class to help with the face-lifting of the interior of the clinic. The time would be on a class day, but classes will be suspended for this gratious service to the college . . . Al Greaves and and Wally Flynn have come up with new angles on the eye; angle X replaces angle Beta, which replaces angle Alpha, suppliment to angle Gamma for simplified calculations . . . The Mugger and his Gal have been vacationing on the sunny plains

of the Sahara Desert, where the Mugger plans to build his combination office, soda fountain, fruit stand, and camel-rest station . . . Bill Tolford, and Marv Myerson each have a fish tank, properly illuminated and graduated in cm's, to calculate any further fish problems in G. O. . . . John Gould has come up with a revolutionary idea — advertising rates, and office hours on peppermint life-savers and distributing them to the populous — this plan can't be licked!! . . . Your reward for dating girls, Al Viro, administered by the "Pearl" — 20 lashes with a hot lasagna . . . Since the Belgian Optometric Societe would like to have exchange students, French, an elective, will be taught by one of our staff teachers . . . Both O. E. P. and P. O. S. are having elections for fraternity offices, with a majority of sophomore members nominated. At the P. O. S. fraternity elections, William Fehrnstrom was elected next year's Chancellor, William Ryan, scribe; All Mastuorbono, guardian of exchequer and Leon Gellerman, corresponding secretary . . . Capt. Labrie, where shall we all go? ? . . . Rover and company continues to roam the dark halls of time, seeking answers to leading questions — why is this, and why is that, and why is why . . . Finger continues to weave a web of intrigue, as the Lover becomes tangled deeper and deeper in the "Web." . . . Certain members of the class are due to be shackled by the bonds of matrimony . . . Guess who? ?

That's it for the month of March, and as Easter approaches nigh, I'll be like the annual Easter Bunny and put an egg in my shoe and beat it . . .

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## OFTOMETRISTS—continued

trists and students to come to Rochester, New York for the American Optometric Association Congress on June 21, 22, 23, and 24, 1953. There optometrists will gather from all over the United States. Association with all these men cannot fail to give you a stimulus unobtainable elsewhere. The Educational program, the entertainment, the problems which face Optometry nationally and local, all these are your problems, and should prove a powerful enough stimulus to make this the finest AOA Congress ever. I'll be looking forward to greeting you in Rochester in June.

# FRESHMAN REVIEW

by Marshall Cohen and Justin Laforet

In the wake of the recent investigations of subversives, look for the feline arteries to be probed by our diligent investigators, with many witnesses slated to testify behind closed doors (and under the skylights) about the red tinge of this highly organized and well-concealed system . . . You heard it here FIRST.

Bob "Bevo" Brouilette (the tall, cool one) has been getting rave notices in the local dailies for his sensational play with the MCO hoopsters. Bob paced MCO to its first trophy, averaging 43 points a game. Art Wilson returned from a siege at the hospital with a bothersome appendix. Overheard in the lobby . . . "Honest, Miss Hastings, I'll show you the scar!"

The March plebiscite put Earl Lupien in the Student Council as our two-year representative, Marshall Cohen in the Vice-Presidency, and Al "Greasythumb" Roy in the Secretary-Treasurer's slot. And of course, a certain individual who shall be nameless but whose initials are Izzy Sol remains Class President, over the protests of the Bob Wilson machine. Recruit Jack Fiorentino recently returned for a visit to MCO. Guess O.D. means

"olive drab" for a while, Jack.

Dave Burstein, of little - league basketball fame, has been amazing the denizens of the POS room with his shrewd tactics at "hearts." Pressing Dave for top honors (?) is Warren Oberg, who challenges anyone to a fast hand of "fish." Anyone know what secrets Mel Golden is discussing with his teachers? Louder and funnier, Mel! Personal Note to Dave B.: If Wilson shows up at lab with an unusually long scalpel, it's not for the cat.

MYOPIC MUTTERINGS: "Alright, sit down and shut up . . . you're holding up progress." Latest Boston-N. Y. commuter is Joel Spiegler, who is apparently fascinated by trains. There's romance in more than railroading, we fear . . . Frank McGrath, "The Quiet Man." Still water runs deep, but it's awfully muddy at the bottom. Roe Grasso, Al Schwartzberg, and a large, black cat make a handsome threesome, with Bwana Devil the best-looking of the three . . .

A plot is being hatched, or something, for a Freshman social affair, with Roger Twyman, Art Isenberg, and Al Roy in charge . . . Hang by your phalanges . . .

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## Want to Practice Optometry?

by David L. Marcus

We are continuing our series of articles which present to you information that may aid you in the location of your practice.

### NEW JERSEY:

*Requirements*—The state of New Jersey last year adopted, revised and supplemented rules and regulations governing the practice of Optometry. These statutes became effective on October 1, 1952 and do not apply to students who were admitted to recognized colleges of optometry *prior* to the fall term of 1952. Interpretation of the above statement reveals that this new law does not apply to the present junior and senior classes at M. C. O. (in regard to requirements for practice) the applicable date of the law is especially important in reference to the new residency clause, which will be detailed a little later.

For practice in this state the law requires that the applicant be at least 21 years of age, have a preliminary education equivalent to four years in high school and have graduated from an accredited school or college of optometry, having had conferred upon him the *degree of Doctor of Optometry* or what in the judgment of the board, is considered its equivalent. He then must satisfactorily pass an examination before the board.

An important addition to the optometry law of New Jersey is the residency clause which states that the applicant must have been "a resident of the state of New Jersey for a period of at least two years prior to the date of filing of the said application." This new requirement will definitely keep many men from practicing in this state in the future. Personally, we feel that this is just another deterrent for prospective optometry students. Let us hope that other states will not include residency requirements in their laws.

*Ethics*—The statute of the newly revised law that concerns itself with what is considered "unprofessional conduct" is outstanding, and completely in accord with the ethical and professional trend that has been growing tremendously in the past few years. Banned entirely is the display of any eyeglasses, frames, lenses, goggles, etc., and the advertising, commercially, in office windows, reception rooms, or display cases outside of the office, of merchandise where it would be visible from the street.

Professional cards shall contain only the name, title, degrees, address, telephone number, office hours and the words "eyes examined" etc. Nothing misleading or commercial shall be permitted.

In this statute, the size of display signs, with name and title, is controlled by Law and neon signs, eye signs or structures resembling eyes are prohibited. The law certainly should be examined by many of the states delinquent by their neglect of adequate optometry controls in regard to ethical practices.

*Opportunities*—The State of New Jersey boasts a 4,200,000 population with approximately 720 registered optometrists. It has wide reputation for its quaint and very attractive towns, as well as heavy manufacturing cities. Many of the cities and towns have substantial manufacturing and resort value well able to support and appreciate the services of new well-trained ethical optometrists.

Although such large cities as Elizabeth, Paterson, Newark and Bayonne are inviting to the new practitioner, there are many smaller cities and towns where the enthusiastic, ambitious optometrist could gain the prestige, respect and comforts that a successful practice affords.

Fairfield, Palisades Park or Tenafly with populations between 8,000 - 10,000 or North Bergen, Kearny and West Orange with populations from 30,000 - 40,000 are just a few of the possible locations from which to choose.

\* \* \* \* \*

### WASHINGTON, D. C.

*Requirements*—Graduation from an accredited school maintaining a course of not less than 1000 hours. With the application for license the applicant must submit 2 recommendations from reputable citizens.

*Ethics*—Standard.

*Opportunities*—The capital of our country is inhabited by 802,178 with a huge drawing population from surrounding areas. The 105 optometrists comprise only 52% of the required number and many more young optometrists could be absorbed to care for the fixed and transient population that comprise the multitude of government agencies and bureaus.

# SILHOUETTES

by Arthur Giroux



DR. HAROLD CLINE

Dr. Cline entered the Massachusetts College of Optometry in 1938 after graduating from the Boston English High School. He was Assistant Laboratory Instructor in Physiological Optics during his Junior and Senior years and graduated in 1942, Summa Cum Laude, with the highest general average ever attained by a Massachusetts College of Optometry graduate. He thus was very deserving of the honor of being Class Valedictorian.

After graduation, he entered the U. S. Air Force in the Fall of 1942. During these early war years, no direct Air Force Commissions were being granted to young Optometrists. He was, however, assigned to the Photographic School at Lowrey Field, in Denver, Colorado, where he became Instructor in Optics. During his stay in the Air Force, Dr. Cline zealously performed a great deal of research in the field of Optics, and was recommended for the Legion of Merit Medal for his research and treatise on the "Use of the Height-finder" by people having either poor binocular stereopsis or monocular vision. He also worked on Vectographs which are now used today in various Orthoptic devices such as the Ortho-Fuser. The Ortho-Fuser, in fact, resulted from much of this important research. During his three interesting years in the Service, Dr. Cline's work and research later proved very beneficial to the field of Optics in general. He was in charge of a Photo-Intelligence Unit doing Stereoscopic work before his discharge from the Air Force as a 1st Lieutenant

in 1945.

Associated with a Boston Optometrist during the next two years, Dr. Cline was kept very busy and gained some valuable experience from the 3,000 cases he saw during this time. Looking back, Dr. Cline believes that these two years proved to be immeasurably beneficial and valuable to him in his private practice later.

He entered private practice in Boston in 1947, the same year he accepted a position on the faculty of his Alma Mater, the Massachusetts College of Optometry, when he became head of the Physiological Optics Department, a position he has held ever since.

Endeavoring to broaden his knowledge in the field of vision, he attended evening classes at B. U. doing graduate work in Mathematics. He also has taken Dr. Feinbloom's Contact Lens Courses, both in New York and here in Boston.

In 1950, he completed much research in television and its effects upon the human eye. Much of this work was later published in a national magazine. Much of Dr. Cline's research work in Astigmatism has also been presented in past issues of the SCOPE.

Practicing now in Mattapan, Mass., Dr. Cline is an active member of the Knights of Pythias, the Masonic Order, and the American Legion. A tireless researcher, he is, at the present time, engaged in research work in Keratometry. Whenever time permits, sports and stamp collecting are the hobbies he enjoys the most. Very active in sports throughout his life, Dr. Cline has been a member of many local baseball and football teams.

An inherent factor which might well have been a contributing influence in Dr. Cline's great interest and success in Optometry may be the fact that both his father and his brother are also graduates of the Massachusetts College of Optometry, the former graduating in 1909, the latter in 1932. Dr. Cline is proud of the fact that his father was one of the first licensed practicing Optometrists in Boston.

Dr. Cline believes that Optometry has taken great strides toward maintaining the professionalism which is present today and foresees even greater strides in the future. He presents in his courses a very modern and technical training in Physiological Optics based on both his experience and broad research in the field.

# *Omega Epsilon Phi News*

by *Samuel J. D'Agostino*

Omega Epsilon Phi, the national fraternity at M. C. O., has recently enjoyed the card and beer party. The party in honor of the pledges was considered a success as evidenced by the refreshments consumed. All the pledges had a big time and the brothers are rightly proud of themselves in the fine handling of the affair. The party held at the V.F.W. hall in Somerville, on March 11, brought together the brothers and pledges in comradeship and song.

Here is the honor list of the pledges being welcomed by Omega Epsilon Phi:

Don Dixon	Peter Eudenbach
Henry Farrell	Wally Flynn
Bob Graham	Al Greaves
Ted Kaknes	Kenny Field
John Lamont	Louis Guertin
Ray Lupien	Bob Brouillette

Now accepted by a national fraternity the new pledges can be sure of fraternity brothers all over the country and benefit thereby. The brothers and pledges both realize that fraternity relationships started in college last longer than the few school years and endure a lifetime.

Plans are being drawn up for the annual banquet held by Omega Epsilon Phi. This end-of-year affair is being looked forward to by the brothers and pledges. The committee, headed by able Art Giroux, promises a big affair and we can count on a grand time.

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## THE YEARS—continued

entrance requirement is high school or its equivalent . . .

## YOUR LAST CHANCE . . . ”

That was 1946, my fellow students and future Optometrists — 7 short years ago! But now, we well know, 5 years of intensive study are required. The future of Optometry is in our well-educated hands. No more 1½ year courses. What would our proficient Drs. Cline, Kuhn, Namias, and Wasserman do with their courses in 18 months. Include Anatomy, Pathology, Histology, Embryology, Orthoptics, Clinic and Shop hours and consider

what kind of colleagues those graduates would make. We shudder! !

Let's look back once again —

1931

“Anti-peddling law enacted in New York. The bill prohibiting the peddling of eyeglasses which recently passed the New York State Legislature has been signed by Governor Roosevelt . . . . the law will be rigorously enforced . . . . the names of any Optometrists who peddle eye-glasses from house to house should be forwarded to . . . . etc.”

Three years later we see our struggling young profession attempting to flex its newly acquired muscles.

1934

“At a hearing held before the Commissioner of Markets . . . the licences of two peddlers were revoked and the license of one was suspended for thirty days. This was the outcome of another cleanup made because of complaints that eyeglasses were being sold on pushcarts.”

We can smile now and say, “Huh, imagine people buying glasses off a pushcart!” But remember that was less than 20 years ago.

Nothing can make us more aware of changes. Nothing can impress us more than a glimpse into the past and its contrast with our lives today. In doing so, we cannot help but feel buoyantly enthusiastic about our future. Optometry's advancements have been great and her problems many. We must remember *now* that the obstacles and problems of Optometry must be assumed by *us*. The older men of the profession are shifting the burdens to *us*. A man cannot consider himself an Optometrist if he closes himself into his own little world and avoids the responsibilities a profession demands. The advancements of our profession in the past have been the result of constancy and perseverance by men such as we. Men with strength and faith in Optometry. Men who believe that the services, Optometry offers, cannot be stifled or drowned by the selfish efforts and hypercritical pressure of a few narrow-minded groups. We've proven ourselves in the past quarter of a century. Be proud that you've chosen such a rewarding profession for your career. Make the next quarter of a century 25 years in which Optometry will attain its full stature and reach ultimate maturity and recognition.

# JUNIOR DAFFYNITIONS

Paul Sussman and Stan Levine

Subjective Squint—when a boy winks at a girl.  
Objective Squint—when a girl winks at a boy.  
Naked Vision—vision in the bath tub.  
Patients—what new optometrists don't have enough of.

Tortoise shell frame—a turtle's spectacles.  
Frame stretching—body building exercise.  
D. B. L.—discrepancies between lens manufacturers.  
An optical center—The Shady Optical Co.  
Lenticular lenses—Rx worn during lent.  
Trial Case—trying to get through school.  
Ophthalmoscopy—a reason for malpractice insurance.

Suspension—getting thrown out of T. O.  
Extortion—the tuition fee (At Columbia, of course).

Salt bath—a swim in the ocean—with Rx.  
Cones—28 different flavors.  
Spirit level—How full is my flask?  
Diplopia—an optometric convention after 10 o'clock in the evening.

Coloboma—a shirt with a tight collar.  
Flight of colors—Old Glory in the wind.  
Maxwell's Triangle—Norm's other wife  
Muller's Fibers—spaghetti  
Loop of Schlitz—???  
Fusion—melting a frame over heat.  
Sag—get a girdle, Doc!  
Lens clock—no good for clocking horses.  
Friend Test—ask your buddy for a FIN.  
Physiological disc—flying eye saucers.  
Fundus—a new O. D.'s background.  
Cutting—the times we stayed home.  
Saddle bridge—a new drink at "The Stable."  
Fog—atmospheric conditions in ophthalmic optics.  
Keratometry—measuring gold content of the "Duke."

Axometer—portable guillotine.  
Optometric candy—Hesky Bar.  
Malingering—8 o'clock instructor sipping coffee at Scharafts.  
Eye grounds—site of our campus.  
Superimposition—sitting on patient's lap during ophthalmoscopy.  
Ishihara—Japanese version of Moo Goo Chow Yuk.  
Camel back—Egyptian lens.  
P. D.—distance between students in exam.

Chips—optometric money.  
Haymaker's Sattelite—Russian grass.  
Suppression—flunking of students.  
Spinning—Indonesian carpet making.  
Polarization—at dinner with "The Bear."  
Wave length—length from forehead to the bend.  
Accommodation—trying to get a room at the A. O. A. convention.

## JUNIOR JABS—continued

of—of. Hey Doc. I got a question about the question. Hey Doc, wait!

Dr. T.L.—(making a bee line for the door) That's the "kiss-off" for today. See you next week.—(SLAM).

Well Backstage, for you at this time, I will say it's all right.

Any similarity of characters in this article to persons living,—it's a shame, isn't it?



## SPEAKING OF SPORTS

by Thomas A. Couch

The score at half time was 37-30 with the M.C.O. Red Marauders on the short end. The second half began. Bob Brouillette got the tap and Paul Taylor drove in for a lay up. Ray Alie then stole the ball and a long pass to Taylor garnered another two points. Brouillette pushed one up and in, Joe Eiduks being fouled at the same time. He stepped up to the foul line and bounced the ball twice and swish! the score was tied.

On the sidelines Dr. Davis pleaded for victory while Dr. Goren demanded one, and the doctors were not to be disappointed. The Maroon and White forged ahead and remained there at the sound of the buzzer to defeat the New England College of Pharmacy 78-70 and thus win the championship of the Greater Boston Small College Conference.



CHAMPIONSHIP TROPHY

A glance at the games preceding the championship game.

Feb. 11 — MCO met Babson again but this time the tables were reversed as the Marauders lost 88-78. With this loss the Marauders were tied with Babson for the league lead (5-1). The game which started out to be a fiasco reversed its form after the first half as the Maroon and White came from a 21 point deficit to within 5 points, but lack of reserves caused their downfall. Brouil-

lette continued his scoring rampage, tallying 46.

Feb. 19 — For the sixth time MCO played Suffolk. Each preceding time the Marauders were slaughtered, but Suffolk was frightened this time. Making it seem effortless Bob "Bevo" Brouillette set an all time MCO record, sinking 28 field goals and 17 fouls for a total of 73. MCO led by one point with seconds remaining, but Jack Resnick, high scoring Suffolk guard who set a record of 75 the previous week, stole the ball and was fouled. He sank both his shots giving Suffolk a 108-107 victory.

Feb. 25 — With a make-shift line-up, since two of the three forwards were unable to play, the Marauders were humbled by Harvard Medical School 105-71. Greaves, Eiduks, and Taylor hit for 23, 20, 19 respectively.

Mar. 2 — For the second time the Maroon and White tallied over 100, defeating Emerson 102-52. Brouillette came off the injury list but had to play with a taped ankle. But nothing the Marauders did was able to go wrong. Greaves tallied 20, Eiduks came close to breaking his high total of 29 with 28, and Brouillette, injured ankle and all, led both teams in scoring with 43.

Mar. 5 — MCO met the New England College of Pharmacy. This was the championship game. Brouillette led the scoring with 39, Greaves had 17 and Eiduks 13. This was the last game for Co-Capt. Mel Slotnick and George Nissensohn. Both played an invaluable part in making the squad the champions that they are.

The team ended the season with a record of 8 wins 5 losses and scored a total of 1042 points, an average of 80.15 points per game. Its league record was 7 wins and 1 loss.

Bob Brouillette, freshman from Brattleboro, Vt., scored an astounding total of 511 points in 12 games. He set an individual scoring record Feb. 19, scoring 73 points against powerful Suffolk University.

With the nucleus of this year's quintet returning next year, the team should be even better if one or two coming freshmen prove they can make the squad.

*(Continued on next page)*

# THE EYE AS A GUIDE IN THE DIAGNOSIS OF CONSTITUTIONAL DISEASES

by Henry L. Cabitt, M.D.

## PART 1

There is a tendency in routine optometric examination to allot only a cursory glance to the condition of the eyes. Only if vivid pathology presents itself is there any attempt of correlation between such findings and the physical state of the body as a whole. There are many general disease entities which first present themselves in the eyes or give clues as to their presence by typical ocular pathology. It would, therefore, seem fitting to stress the value of searching attention to this organ in routine optometric examinations.

There are two approaches in emphasizing the eye as a guide in diagnosis. The first is to discuss the various diseases and include the ocular findings. The second would be to discuss each tissue of the eye and its involvement when constitutional disease is present. In this paper the second method will be utilized since it seems to be more apt in focusing attention to the value of a detailed examination of the eye.

*Eyelids:* The eyelids should be carefully examined. An obvious defect of this structure is ptosis, drooping of the lids. This condition is usually congenital, but it may be due to the paralysis of a branch of the oculomotor nerve, as for example in lues. It may also be due to muscular degeneration, such as progressive muscular dystrophy, or in peripheral and central nervous system disorders. One of the first signs of myasthenia gravis is ptosis. In Horner's syndrome, where there may be paralysis of the sympathetic nerve which supplies the palpebral involuntary muscles, ptosis may occur.

Blepharitis is an inflammatory condition of the eyelids. It may be due to dietary defects, and is common in refractive errors. Certain exanthemata such as measles may have this complication. The use of some cosmetics will also result in a matting and crusting of the eyelids.

Edema of the eyelids may be inflammatory, non-inflammatory, traumatic, or systemic in origin. The inflammatory type may be due to an infection of the lacrimal apparatus, nasal sinusitis, or orbital cellulitis. The traumatic type may result from injury or insect bites. Edema of the systemic origin is usually renal, cardiac, or due to trichinosis. The non-inflammatory type is seen in angioneurotic edema.

Dermatitis of the eyelids may be allergic in origin, wherein there is a sensitivity to face powder, hair dye, or poison ivy. Herpes zoster ophthalmicus presents a typical picture in the lid. A sign of seventh nerve disease may be ectropion due to paralysis of the orbicularis muscles. Neurotic people show blepharospasm as a nervous tic. Lagophthalmus, with difficulty in closing the eye, may be due to marked exophthalmic goiter or facial palsy. Fractures of the orbit may result in emphysema of the lid. Patients in poor health or with anemia sometimes have hordeola.

*Lacrimal Apparatus:* Dacryocystitis is a condition which may evidence itself by epiphora, purulent discharge and swelling of the tear sac. This condition is often due to adhesions in the nasolacrimal duct or an obstruction near the terminal end of this apparatus in the nose. Therefore, the nose should be carefully examined for polypi, delected septum, or hypertrophy of the inferior turbinate.

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## SPORTS—continued

### SEASON INDIVIDUAL SCORING

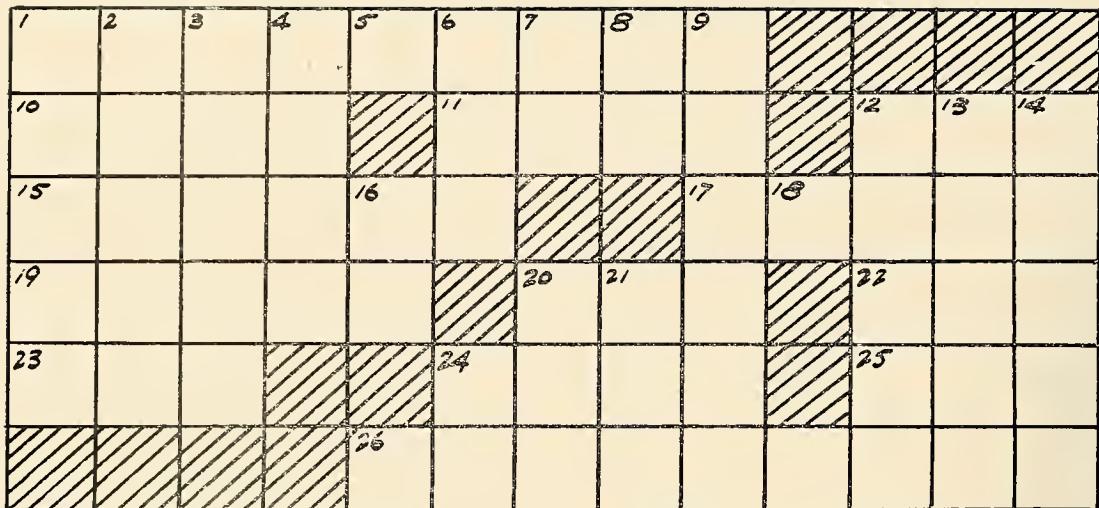
Not indicative of time played

	Games	Goals	Fouls	Total
Alie, Ray	11	13	18	44
Brouillette, Bob	12	208	95	511
Eiduks, Joe	13	69	56	194
Flynn, Wally	8	12	13	37
Greaves, Alan	12	62	33	157
Green, Sid	12	5	5	15
Nissensohn, George	10	2	5	9
Slotnick, Mel	6	1	10	11
Taylor, Paul	13	18	26	62
<b>RESERVES</b>				
Sullivan	1	0	1	1
Deckelbaum	1	0	0	0
Graham	4	0	0	0
Totals	13	390	262	1042

*Coach*, Dr. Mitchell Kuhn

*Manager*, Tom Couch

*Trainer*, John Janes



IN THE 180th MERIDIAN

1—eyelid  
 10—wan  
 11—type of geometry problem  
 12—mixture of sand and water  
 15—law maker in P. O.  
 17—motor third cranial nerve  
 19—red soldiers (colloq)  
 20—flying mammal  
 22—left transverse (ab.)  
 23—trigometric function (ab.)  
 24—oriental place whose dancers were recently on  
     Broadway  
 25—three (comb. form)  
 26—adhesions of the iris.

IN THE 90th MERIDIAN

- 1—second cranial nerve
- 2—Mr. Nurmi's first name
- 3—Feminine name (pl.)
- 4—Regional Employment Bureau of the North (ab.)
- 5—carbon (ab.)
- 6—last (ab.)
- 7—See!
- 8—you see (phonetic)
- 9—a drug which contracts the pupil
- 12—many (comb. form)
- 13—violet rays
- 14—girl's name
- 16—bone
- 18—center (ab.)
- 20—forbid
- 21—malt drink
- 24—preposition



## Happy the Patient

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## SHURON OPTICAL COMPANY, INC.

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